

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000121515

**FILED**  
**Oct 12, 2006**  
**Secretary of State**

**Entity Name:** RIVERS' EDGE AT LINGER LODGE LLC

**Current Principal Place of Business:**

17101 DOWNS DRIVE  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

17101 DOWNS DRIVE  
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number:** 43-2093760

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GAYNOR, JOSEPH W  
304 MONROE ST  
DUNEDIN, FL 34698 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOSEPH W. GAYNOR

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: RICKETTS, JEFFREY J  
Address: 570 EDGEWATER DR  
City-St-Zip: DUNEDIN, FL 34698

Title: MGR ( ) Delete  
Name: KAMPSON, MARY LEE  
Address: 1701 DOWNS DRIVE  
City-St-Zip: ODESSA, FL 33556

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: KAMPSEN, MARY LEE  
Address: 1701 DOWNS DRIVE  
City-St-Zip: ODESSA, FL 33556

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARY LEE KAMPSEN

MGR

10/12/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date